



NHS

AMBULANCE **HART**  
Hazardous Area Response Team

Edition 1

May 2009

# INSIDE

# HART



## Ambulance staff in the inner cordon

**CASE STUDIES**  
Real incidents  
attended by  
HART teams

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**SPOTLIGHT**  
On the new  
HART Forward  
Command  
Vehicle

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[www.ambulancehart.org](http://www.ambulancehart.org)





**Russ Mansford,**  
Strategic Ambulance  
Advisor to the  
Department of  
Health and HART  
Programme Lead.

# WELCOME

## To the first edition of INSIDE HART

*It has been an extremely busy first two years for the HART programme and its effectiveness in supporting emergency services personnel on the ground has already been tested and proven time and again.*

**"We look forward to the continued development of HART capabilities and to strengthening our position as part of an effective new multi-agency emergency response team."**

*Russ Mansford.*



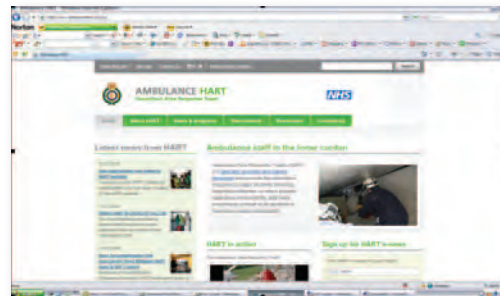
Our specially trained and equipped HART teams are working alongside other emergency services – especially fire and police – and with other agencies and personnel to provide an enhanced ambulance response to unusual, often dangerous, hazardous incidents.

From the outset, I felt that we should endeavour to provide the best available equipment, the highest standard of training and the most robust protocols and procedures to support our crews on the ground. And HART, although still in its infancy, is already becoming established as the primary health service response to major hazardous incidents and potential CBRN attack.

In this new magazine, **Inside HART**, you'll get a behind-the-scenes look at how the HART teams are being rolled out across England. The magazine is designed to highlight how we are working together with our ambulance, fire and rescue, and emergency services colleagues to deliver a multi agency emergency response team to better protect our local communities.

It includes articles, interviews, case studies and anecdotes about the training programme, recruitment process, field exercises and major incidents we've attended so far, where HART has been able to provide genuine added value to the overall response to hazardous incidents.

You can also get the latest HART news on our new-look website, [www.ambulancehart.org](http://www.ambulancehart.org). In addition to in-depth information about HART and what we do, you'll find regular news updates, recruitment information, a virtual tour inside our state-of-the-art forward command vehicles, useful links and videos of HART units in action.



We also recently produced a DVD, **Ambulance Staff Inside the Inner Cordon**, which takes you on a tour of the day-to-day operations of HART units across the UK and how we prepare these personnel for this type of work. It includes interviews with people such as the Parliamentary Under-Secretary for Security and Counter-Terrorism Lord West, as well as HART, police and fire personnel, and looks at the history of the ambulance service and how HART came to fruition.



# INSIDE HART

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# Ambulance Personnel INSIDE THE INNER CORDON

**Mick Hardaker**, HART Operations Support Manager for Yorkshire Ambulance Service NHS Trust, believes this is an important distinction in the duty of care of the ambulance service.



***"We can no longer wait for casualties to be brought out to us,"***

says Hardaker

*"We have a duty of care not only to the casualties but to all the other emergency responders working in that hot zone. We're there to ensure that if anybody has a clinical problem within the hot zone the ambulance HART can move in and stabilize, maximizing a patient outcome, which is what we're there for."*

In 2004 the Ambulance Service Association (ASA) and the Department of Health asked the ASA Civil Contingencies Committee to look into the feasibility of ambulance personnel joining other emergency personnel to work within the inner

cordon to provide decontamination to casualties and emergency services workers, under medical supervision.

In January 2005 experts in mainstream ambulance services, clinicians and specialists in the CBRN field agreed that not being able to work in the hot zone was potentially impeding the ability of ambulance personnel to undertake necessary clinical interventions. Moreover, they established that it would be possible to carry out key clinical skills whilst wearing and using the necessary personal

protective equipment to work safely in such environments.

Then in July 2005 during the London Bombings, paramedics went to work alongside the fire and rescue service to treat casualties where they lay.

The life-saving capability demonstrated during this major incident gave further impetus to the HART programme and a decision was taken to train and equip a specialist team to work inside the inner cordon, even when there were contaminants or other serious hazards present.



***HART, the Hazardous Area Response Team programme, is led by the Department of Health and is being managed and rolled out across NHS ambulance trusts in England.***

**Dr John Stephenson**, Medical Director East Midlands Ambulance Service NHS Trust, understands the difficulties of operating under these conditions.

***"A lot of what they do is quite finely skilled work – putting in needles, giving injections, and putting in breathing tubes,"***

says Stephenson



***"Those are the sort of things that you find very difficult to do with a thin latex glove on. Doing it in thick protective clothing and thick rubber gloves requires intensive training and practice."***

*"The HART training means that for one week in six, teams will be using and practicing the extra skills they have acquired and be on exercises with other emergency personnel."*

In 2007, the first Department of Health HART Incident Response Unit (IRU), capable of responding to CBRN incidents, was established within the London Ambulance Service NHS Trust.

In addition, the Fire Service was developing and implementing its New Dimension response to similar incidents and in 2006 requested that the

Department of Health consider training paramedics to work in Urban Search and Rescue (USAR) environments alongside fire personnel. This work was soon combined within the developing HART programme.

The USAR module includes training to treat casualties in areas of difficult access including some of the most dangerous environments such as collapsed buildings, tunnels, and at height.

*The HART strategy is to specifically train and equip ambulance personnel to work safely alongside other emergency personnel within the inner cordon, or "hot zone" of a major hazardous incident.*

Being able to work in the centre of these scenes means that lives can be saved that may otherwise be lost. Traditionally, the ambulance service only operated in areas deemed safe working environments, outside the inner cordon where contamination and hazards were not present.

Various major incidents in recent years however, alongside the increasing threat of a chemical, biological, radiological or nuclear (CBRN) occurrence, have meant there was a need to re-evaluate the role of the ambulance service at these scenes.

In late 2003, an exercise at London's Bank underground station to test the operational response to a chemical attack on the Tube system raised the question of ambulance personnel going to the heart of an incident – inside the inner cordon or 'hot zone' – to support emergency personnel and treat casualties immediately.

**Trevor McDonald**, USAR Technician with the West Yorkshire Fire & Rescue Service, believes there are a number of benefits to be gained through working alongside HART and USAR paramedics.

*"On a personal level, you get to know them. You get to know their first name and you're always learning about the new skills they have acquired. Likewise, we are able to inform them of our new skills and any training we are*

*undertaking,"* he says.

By 2011, 12 HART units are expected to be rolled out across England. According to McDonald, these will all play a vital role in emergency response.

***"There is no doubt that the HART teams are here to stay and that they are a valuable contribution at the inner cordon."***

comments McDonald





**Hilary Pillin,**  
Programme Manager,  
HART Programme.

# ROLLING OUT THE HART TEAMS

***The first HART team was established in London in January 2007 and has responded to thousands of hazardous incidents and life threatening Category 'A' calls. Teams are also up and running in West Midlands and East Midlands with North West and Yorkshire going live in August 2009 and other Trusts launching their teams over the next 2 years.***



***"We started with a blank sheet of paper so we have had a steep learning curve to get the teams up and running."***



Being able to deploy highly trained and skilled teams to such a wide range of major incidents in support of other emergency service personnel is at the centre of the HART programme.

According to **Hilary Pillin**, the HART Programme Manager, the decision to enhance the role of ambulance services in the inner cordon was tragically reinforced in July 2005 during the London Bombings.

***"The 7/7 bombings were critical to us in terms of highlighting the importance of getting paramedics into the centre of incidents,"*** she says.

*"Had those bombs in those scenes contained any kind of contaminant or had there been any other type of hazardous environment involved then we wouldn't have been able to get in there and those people wouldn't have had the treatment that they needed critically at that time."*

Once it was identified there was a need for these capabilities to be established, it was crucial for the

project team to work with all emergency response organisations in developing a programme that would make a real difference.

*"The project really has been multi agency and multi disciplinary-led right from the very beginning. We are sending personnel into potentially high risk areas and their safety has always been paramount."*

The training programme developed for HART is structured and robust, as is the competency-based recruitment process. It requires applicants to complete a self-assessment questionnaire to ensure they are aware of all HART requirements. They must also undergo medical and fitness assessments before a formal interview to draw out their experience and behavioural competencies.

*"Paramedics are more used to being out on their own or with another crew member," Pillin explains.*

*"So we are looking for people who can work not only within their own team, but as part of the wider multi-agency team with other emergency services."*

*"HART members must also have the presence and confidence to take a lead role for health in the command and control of a major incident when necessary, feeding back crucial information from the inner cordon to the wider health community."*

As well as practical training, the HART programme focuses on learning through HART experiences as their skills and knowledge are applied in the real world. This process is part of a structured evaluation that allows the programme to be refined and enhanced as it becomes further integrated in the emergency response network.

*"All the time, we are working with the HART personnel to understand what affects their levels of confidence and resilience and to learn how*

*we can make the HART response as efficient and effective as possible."*

There has been a very strong focus on the ability to provide mutual aid across the country, and across our borders with the devolved administrations if necessary. As part of this process, a national standard is being developed to ensure all members are recruited against a model framework, receive the same high level training, use the same equipment and work to the same protocols wherever they are in the country.



In addition to standardising the training received across all current HART modules, Pillin and her project team are looking to expand the capabilities of HART teams so they can be even more effective in hazardous environment scenarios.

*"We're enhancing our capabilities around inland water scenarios such as floods and also off-shore maritime incidents,"* says Pillin.

*"Alongside that we're also looking to support the police more in terms of public order incidents and in future we'd also be looking to improve clinical skills where possible."*

HART teams are now fully operational in London, the West Midlands and East Midlands with others coming on line during 2009/10. Twelve teams will be operational across the country by April 2011.

# TRAINING THE HART TEAMS

**Dave Bull is the HART Education and Training Development Lead.**  
**We asked him what goes into assembling and equipping a HART team.**



**Dave Bull,**  
HART Education and  
Training Development  
Lead

## How are the teams made up?

Each full HART unit is made up of 42 members. All are trained to form part of the major Incident Response Unit (IRU) and half of any HART team also undergoes additional Urban Search and Rescue (USAR) training.

HART IRU is trained and equipped to respond to incidents involving Chemical, Biological, Radiological or Nuclear (CBRN) occurrences or those involving hazardous materials (HAZMAT) which have happened either accidentally or deliberately. These could include events such as a chemical explosion at a factory, large fires, explosions or a suspected terrorist attack.

The HART USAR capability provides paramedics with extended skills to safely locate, stabilise, treat and rescue casualties from dangerous environments including working underground, at height, within collapsed buildings and in flooded areas.

be done locally with Fire and Police services as these are the colleagues they will most likely be working with once out responding. Where this has not been possible, due to resourcing or timing issues, some services have been happy to provide the training packages we need to HART personnel from one end of the country to the other.

They then attend a three-week residential course at the Defence Nuclear, Biological and Chemical Centre at Winterbourne Gunner, Salisbury. This facility is responsible for training military personnel in biological and nuclear warfare as well as delivering courses to police forces in CBRN.

We train for the worst case scenarios. If they attend a CBRN incident, they will have to locate patients, triage them rapidly, possibly perform life-saving interventions, all the time working with fire and rescue to bring prioritised casualties out to a collection point.

equipment including a multi-oxygen delivery system. They also have Rapid Response Vehicles allowing them to respond to category A calls on a day to day basis.

## Who is involved in training HART members?

Training instructors are drawn from right across the emergency services network, including police, fire and rescue, military and defence, the Health Protection Agency and NHS doctors who also have some military training, either in the Territorial Army or Reserves Services.

We also have doctors, including A&E consultants who have completed operational tours in Iraq or Afghanistan, who deliver training in trauma, including injuries caused by bullets or bomb blasts.

## Do you work with other emergency services personnel to strengthen their understanding of HART?

A big part of my responsibility is to broaden the awareness across all emergency services of the HART role. We produce a number of training DVDs and I am often called upon to make presentations and conference speeches.

Our aim is to ensure that HART is embedded in any response to a serious incident. This can close the gap in our capability to deliver clinical care within the inner cordon.

**For more information about HART log onto [www.ambulancehart.org](http://www.ambulancehart.org) and sign up for the HART e-newsletter.**



## Is the training based on standardised clinical methods?

The clinical care offered by HART paramedics is based on Joint Royal College Ambulance Liaison Committee (JRCALC) guidelines.

## What is involved in training a HART team?

Since our pilot programme just over two years ago, we have developed a bespoke modular training course for HART. We aim to give HART members the theoretical and practical knowledge and competencies they'll need to carry out operations within the inner cordon of any major incident.

HART members who are selected through the rigorous recruitment process then undergo training in the use of a range of protective clothing and equipment already issued to police, fire and some health service personnel. This is usually completed locally. In fact we prefer this to

## What sort of PPE do they use?

HART's training requirements will evolve as Personal Protection Equipment (PPE) changes and new suits are developed.

At the moment, HART training covers the use of breathing apparatus (BA) and three types of protective clothing – the Civil Responder 1 (CR1) suit, worn by the police, powered respirator protection suit (PRPS), used by the fire service and issued within the NHS for use in decontamination and a gas-tight chemical suit, worn with Breathing Apparatus.

The teams are also provided with specialist vehicles. The forward command vehicle contains sophisticated technology and communications equipment and carries essential kit for the initial response. This is supported by vehicles carrying additional PPE, breathing apparatus and clinical





# HART TEAMS IN ACTION



## CARBON MONOXIDE RESCUE

***How a HART unit was able to support the Ambulance Service and triage patients in a potential contamination incident.***

Paramedics from the London Ambulance Service were unable to enter a London house recently following a call out where two people were unconscious and two more had collapsed due to an unknown cause.

HART, working with the fire brigade, were able to enter the building wearing breathing apparatus and conduct a risk assessment, before triaging the patients who were all rescued. The cause of their collapse was later found to be carbon monoxide poisoning. The patients were taken to a London hospital where they were placed in a hyperbaric unit and given emergency treatment for CO2 poisoning.

Marc Rainey, the CBRN co-ordinator for the London Ambulance Service and responsible for establishing HART in London, said: "This was a classic case where HART was able to gain access to the patients.

"Had there been a risk of contamination or exposure the HART were on hand for the safety of the fire crew. The more incidents we attend together, the more fire service staff understand what HART is there to do," adds Rainey, who is experienced in multi-agency working.

"One important element is communication – to let our fire service staff know about HART and its capabilities. HART is partly trained by the London Fire Brigade so understands all its principles around safety."



## LEEDS CRANE COLLAPSE

***How a HART Urban Search and Rescue Team were called in to support Fire and Rescue crews at a Leeds construction site.***

HART Urban Search and Rescue (USAR) were recently called out to a Leeds construction site where a crane had collapsed, trapping its operator some five metres off the ground.

Fire and Rescue Services and a paramedic crew on the scene, quickly recognised the need to bring in the USAR team to support the rescue effort.

USAR immediately established communications with the FRS officers to ascertain the safety of the structure. They were then able to stabilise the patient on the scene, pack him safely and complete the rescue operation.

He was then taken by the crew to Leeds General Infirmary where after a short stay he was discharged with no serious injuries.

According to Mick Hardaker, HART Manager for Yorkshire Ambulance Service, the communication and professionalism of the operation was second to none.

"The key to the request for HART to attend was the awareness by the FRS and paramedics on the scene of the specialist USAR capability, and a full understanding of the risks with working at height."

"The on-scene co-operation between the crew, FRS and USAR was very good and resulted in a successful patient outcome."







## CHLORINE SCARE AFFECTS 50 AT WEST MIDLANDS SWIMMING POOL

***The West Midlands HART team were thrown in at the deep end during their first week of operation, when they were called to a gas-related chemical incident at a local swimming pool.***

The new West Midlands HART team played a vital role in the multi-agency response to a major incident at a local swimming pool, when the release of a chlorine-based chemical substance affected 50 people, most of them children.

The ambulance service had received reports of a number of people at the Coseley Swimming Pool in Dudley who were displaying symptoms of watering eyes, coughing, difficulty in breathing and throat and nose irritation. The decision was made to send the new HART team to help fire and police services deal with the situation.

West Midlands HART Manager James Price says: "This was a mass casualty incident which required just the type of specialist training and equipment that the HART team can provide. We established a command point inside the HART forward command vehicle, where the silver commander was based for the entire incident, and my team went to work to help the patients, many of whom were children.

"We triaged, treated and arranged prompt transport for the patients to the three local receiving hospitals. This enabled us to minimize the pressure on our ambulance Trust's resources whilst giving the most appropriate care using specialist HART equipment such as our bulk oxygen delivery systems."

It is clear from the way the HART team managed the incident that the fire and police services were extremely impressed by the comprehensive HART response. One police officer made a specific point of saying how impressed he was with the way the team operated and with the standard of equipment they were using.

Says James Price: "There's no doubt that during this incident the HART team and its specialist training and equipment, enabled the emergency services to respond to the specific needs of these patients in a better way than we have been able to do before."





## HART TEAM ON SITE AT FATAL WARWICKSHIRE FACTORY FIRE

***How a HART unit went to the aid of emergency services colleagues in a major fire incident.***

A HART Urban Search and Rescue team provided vital support and medical cover while attending a fatal blaze at a vegetable warehouse near Stratford upon Avon.

Several fire-fighters entered the building during the fire because of fears that workers may be trapped inside. Tragically, four fire-fighters lost their lives after parts of the building collapsed.

Ten paramedics from the Yorkshire Ambulance Service HART Incident Response Unit joined fire-fighters and ambulance teams at the scene.

During a risk and safety check following the blaze it was discovered that part of the roof had collapsed and sections of the floor had melted.

The fire brigade built a wooden pathway through the wreckage with a 30ft drop on either side and members of the HART unit joined them in making further safety checks.

The fire and rescue operations commander of Buckinghamshire Fire Service said: "We were very grateful to have HART there. They worked in a positive, collaborative way and had no problems working within our systems and procedures. It worked very well."

"The fire brigade urban search and rescue teams did feel safer having the HART paramedics on the scene in case anyone required treatment."

***The HART programme extends its sympathies to the families and colleagues of the fire-fighters who lost their lives in this tragic incident.***





# HART TEAMS IN ACTION

## ROYAL MARSDEN HOSPITAL FIRE

***How a HART unit provided vital information as fire devastated one of the UK's leading cancer hospitals.***

More than 1,000 patients and staff were evacuated when fire swept through the top floor of London's Royal Marsden Hospital, one of the UK's leading cancer hospitals.

A four-strong team from the London Ambulance Service HART Incident Response Unit was on the scene minutes after the alarm was raised. They gave rescue services vital help in ensuring the safety of evacuated patients.

The 80 in-patients who were evacuated included people who were undergoing operations when the fire broke out and also patients from the intensive care unit. They were first taken to Royal Marsden's reception area to await transfer to other London hospitals.

The waiting area however was downwind of smoke from the blaze and, after consultation with the HART unit, an alternative entry route was used so that patients would suffer less exposure to smoke as they were transferred to ambulances.

HART was concerned that scanning equipment in the hospital's x-ray unit could represent a serious health risk in the event of a radioactive leak. They also feared the fire might be contaminated with asbestos from the roof of the 146-year-old building. Members of the unit, wearing breathing apparatus, were on standby for four and a half hours.

A London Ambulance Service officer said: "HART were very helpful. It is important to be aware of what they have to offer. They enhance the ambulance service response and it's nice to know they are available."



## UNDERGROUND PASSENGERS EVACUATED AFTER DERAILMENT

***How a HART unit provided crucial support to rescue services in the aftermath of a major transport incident.***

More than 500 London Underground passengers had to be led to safety after an underground train derailed in central London. The rescue, between Bethnal Green and Mile End on the Central Line, took place amid fears of a terrorist attack.

The London Ambulance Service HART Incident Response Unit raced to the scene, along with police and other rescue services, after calls to London's emergency operations centre. Reports were also received of a suspect package at an underground station and a train on fire, sparking further fears of a terrorist incident.

The five-strong HART unit split into two groups, at Bethnal Green and Mile End, as the three-hour evacuation of the derailed train and other trains in the tunnel began. The Mile End group set up a casualty holding area in a train already at the platform and assessed passengers emerging from the tunnel. Some were evacuated to ground level and others sent to the casualty area.

The HART unit also took a stretcher and oxygen equipment into the tunnel to treat a passenger injured in the derailment.

On learning that all passengers would be evacuated via Mile End, the Bethnal Green unit were asked to manage the nearby survival reception centre. Both HART units were involved in setting up communications at Mile End, Bethnal Green and the survival reception centre.

British Transport Police Chief Inspector said: "HART provided an effective and efficient response. We worked very well together and other agencies would benefit from the HART approach and style of engagement. They integrated well at all the correct levels and got things done."







# EQUIPPED AND READY

***During the Blitz the presence of ambulance crews at the scene of bombings was standard practice. They went where they were needed, carrying people from collapsed buildings, triaging them at the scene at then taking them to hospital. These workers were largely unprotected and put themselves at great risk, both as individuals and as a unit.***

***"What we have developed is a unique integrated package of technologies that significantly improves the safety of those risking their lives in potentially dangerous environments."***

says Russ Mansford, who heads up the HART programme.

Modern equipment however has enabled paramedics to resume that role safely and more effectively than ever before.

The HART programme trains personnel to meet the demands of emergency response in a modern world. So it's only natural that HART teams be equipped with the latest vehicles, equipment, technology and support to get the job done. HART teamed up with Excelerate Technology to design and develop a set of vehicles that would incorporate the technologies, tools, intelligence and resilience to ensure the best possible outcomes for patients and emergency personnel. They, in conjunction with coach builders WH Bence, came up with a suite of Major Incident Response Vehicles (MIRVs).

David Savage, Chairman and CEO of Excelerate Technology, says, ***"HART will be the first to deploy what are clearly the most comprehensively equipped Major Incident Response, Command, Communications and Management Vehicles ever commissioned."***

***"They are designed to enable personnel to react instantly to changing conditions, improving risk assessment and management capabilities."***

With each set comprising three vehicles, teams are now equipped with a main incident response unit with sophisticated command and communications technology, as well as vehicles carrying their PRPS, a CR1 suit, a gas tight suit, and breathing apparatus which can provide oxygen to up to 48 casualties at a time. This Personal Protective Equipment (PPE) means life-saving treatment can be performed in some of the most hazardous environments.



The MIRVs themselves incorporate mobile satellite communications to enable the use of voice, data and video operations which can be deployed within four minutes of arriving at a scene.

On board, the vehicles are equipped with a mast for CCTV and infra-red cameras for search and rescue purposes, heavy duty touch screen displays, computers and software designed to operate wherever the HART units are deployed.





# ACCESS ALL AREAS

***Inside HART takes you behind the scenes with Steven Moore, HART Manager, East of England Ambulance Service NHS Trust.***

**Steven Moore,**  
HART Manager,  
East of England  
Ambulance Service  
NHS Trust



## **How did you get your team ready for the HART training?**

Before we could establish the HART team we needed to inform staff about how the team would operate, the kinds of skills we were looking for, as well as answering all the questions staff had about the team.

This was followed by the recruitment process. The huge geographical area the Trust covers added its own unique challenges to the recruitment process! But at the same time this meant that not only was the HART base appropriately located from a deployment point of view but it allowed us to open the HART role up to as many employees as possible.

For us the snow at the beginning of February caused some additional challenges because staff members weren't able to get to their occupational health appointments. This meant we had to re-arrange these appointments at short notice which placed an additional burden on the whole process.

So you could say there were quite a few challenges in getting ready for the training!

## **What were you looking for specifically when recruiting HART members?**

As a Trust we were looking for people who were keen to learn, enthusiastic about what they were being asked to do and probably most importantly that they were good team players. The risk of having someone who was not prepared to work as part of a team would jeopardise the safety of other members of the team.

So prior to being interviewed all the applicants attended the Physical Competence Assessments. This was the first time we were able to see them working with their colleagues and interacting as part of a team. It also gave the students a good idea of what was going to be expected of them if they were successful.



## **What has been the overall response to the implementation of HART in the Trust?**

Many members of staff see the HART programme as an exciting move forward for the Ambulance Service because it allows staff to work in areas they have not been able to operate in before.

As with any new project there are concerns around the HART team taking away roles staff members currently perform.

But when we explain what it is the HART team will be doing, many staff are realising that HART is very much about working in areas we're not able to operate in currently, and that this allows us to deliver definitive patient care much earlier than has ever been possible.

## **In your opinion, how vital is the HART programme to your role?**

Until now the Ambulance Service has not had a team of dedicated specialists who are experienced in working in hazardous areas. Because of this, treatment of patients didn't happen until after the Fire and Rescue Service had arranged for the patient to be brought out of the inner cordon having received very limited medical intervention.

The HART programme now allows ambulance staff to treat patients before they are rescued. Now we're able to deploy people with the right training, right skills and most importantly the right PPE to ensure the best possible care can be given to patients.

It will only be with time that we are able to see the true benefit of the HART team as they not only allow ambulance personnel into areas they have never been before but also allow earlier patient care to be delivered which can only be of benefit to all.





# HEALTHY CONFIDENT AND PREPARED

***We talk to Tony Zarola, whose research and evaluation is keeping HART on its toes.***

A HART Incident Response Unit was recently called out to a report of both patients and London Ambulance Service crews suffering exposure to unknown chemicals in a block of flats. With their specialist training and HAZMAT/CBRN knowledge, the presence of the HART IRU on the scene was vital to the protection of the LAS crews and the health and safety of the patients. According to one LAS officer, "we couldn't have done it without them."

This is just one of thousands of incidents evaluated and analysed by Occupational Psychologist, **Tony Zarola**.

Tony has worked with HART since 2007 to support the roll out of the project across the UK. He and his colleagues continually evaluate the effectiveness of the project to ensure that it is working, both as individual HART units and in fulfilling its role as a pivotal point in improving the multi-agency response to major incidents.

***"I take theories and science in psychology and apply these in the HART workplace," says Zarola.***

***"Very early on we were asked by HART if they had the right people. This was impossible to know without gathering and analyzing the evidence."***

Zarola consulted HART members, other emergency services personnel and ambulance colleagues through a series of initial discussions, surveys, interviews and analysis of some 9,000 records of incidents where HART had responded. He examined the role and value of HART, the process for selecting members, training content and the effectiveness of the training methods.

***"We asked the hard questions, like what is the value that HART adds?" says Zarola.***

From here, they have developed a rigorous evidence-based process that allows this value to be constantly measured, tested, and proven.



**Tony Zarola in discussion with HART colleagues.**

***"It allows us to be ahead of the game," says Zarola. "It gives trainers confidence that what they're doing is working, fit for purpose, and is enhancing capabilities."***

***"We know the HART contribution is wide-ranging. I've witnessed this first hand as HART units build multi-agency relations by working with fire, police and ambulance colleagues in their area, so that as a collective our teams are confident, healthy and prepared."***

## THINKING OF JOINING THE HART TEAM?

If you're considering joining the HART team in your own NHS ambulance trust, visit the recruitment section of the **[www.ambulancehart.org](http://www.ambulancehart.org)** website.

You will be able to find out about the application process and see more about what the job entails. NB to be eligible to apply you will need to have at least 3 years current ambulance operational experience.

You can also use the website to sign up to the regular HART e-newsletter.

## INSIDE HART

### EDITORIAL CONTACT

**Editor:** Carl Rees  
National Communications Lead  
HART Programme  
**Telephone:** 01273 328140 or 07958 547727  
**Email:** [carl.rees@londonsea.com](mailto:carl.rees@londonsea.com)

## USEFUL HART CONTACTS

### Russ Mansford

Strategic Ambulance Adviser (and HART Project Lead for DH) Department of Health Emergency Preparedness Division  
Email: [russ.mansford@dh.gsi.gov.uk](mailto:russ.mansford@dh.gsi.gov.uk)



**Russ Mansford**



**Sandra Ebelthite**



**Hilary Pillin**



**Gary Donald**



**Jamie Fountain**



**Richard McKeand**



**Dr John Stephenson**



**Seamus Elliot**



**Dave Bull**



**Carl Rees**

**Sandra Ebelthite**  
PA to Russ Mansford  
Email: [sandra.ebelthite@dh.gsi.gov.uk](mailto:sandra.ebelthite@dh.gsi.gov.uk)

**Hilary Pillin**  
HART Programme Manager  
Email: [hilary.pillin@ambulancehart.org](mailto:hilary.pillin@ambulancehart.org)

**Gary Donald**  
HART Fire Liaison Representative  
Email: [gary.donald@ambulancehart.org](mailto:gary.donald@ambulancehart.org)

**Jamie Fountain**  
USAR Training Lead  
Email: [jamie.fountain@ambulancehart.org](mailto:jamie.fountain@ambulancehart.org)

**Richard McKeand**  
HART Project Lead  
(Vehicles & Equipment Procurement)  
Email: [richard.mckeand@ambulancehart.org](mailto:richard.mckeand@ambulancehart.org)

**Dr John Stephenson**  
HART Clinical Sub-Group Lead  
Email: [john.stephenson@emas.nhs.uk](mailto:john.stephenson@emas.nhs.uk)

**Seamus Elliott**  
HART Human Resources Sub-Group Lead  
Email: [seamus.elliott@eastamb.nhs.uk](mailto:seamus.elliott@eastamb.nhs.uk)

**Dave Bull**  
HART Education & Training Development  
Sub-Group Lead  
Email: [dave.bull@cbrn.pnn.police.uk](mailto:dave.bull@cbrn.pnn.police.uk)

**Carl Rees**  
HART Communications and PR Lead  
(Media Enquiries)  
Email: [carl.rees@londonsea.com](mailto:carl.rees@londonsea.com)